OFFICE OF THE OMBUDSMAN FOR THE INSTITUTIONALIZED ELDERLY

Volunteer Advocate Program

Overview

The New Jersey Office of the Ombudsman for the Institutionalized Elderly was created by statute to preserve and protect the health, safety and welfare of seniors, 60 years of age or older, residing in long-term health care facilities. The Volunteer Advocate Program adds a new dimension to that mandate by establishing a visible presence within the facilities to represent the need and concerns of residents. Volunteer Advocates are trained and certified by the Office of the Ombudsman to provide on-site advocacy to residents and their family members. Advocates complement the investigative function of the Ombudsman's Office by attempting to resolve issues at the lowest level in the long-term care facility and referring complaints of abuse, neglect and exploitation for investigation.

The Volunteer Advocate Program was started in 1993 as a pilot project in Essex, Hudson, Morris and Union Counties. Due to the success of the pilot, the Volunteer Advocate Program was expanded in 1995 to include all 21 counties in New Jersey. Today there are over 200 Volunteer Advocates assigned to Nursing Homes throughout the state. The goal of the program is to recruit volunteers to be placed in all skilled nursing facilities throughout the state. The second phase of the program is to recruit and train volunteers to be assigned to Assisted Living facilities to advocate for the rights of residents.

Mission Statement

The mission of the Volunteer Advocate Program is to provide the best on-site advocacy service to assist long-term care residents, their family members and facility staff in proactively resolving quality of care and quality of life issues as close to the bedside as possible. By utilizing teams of volunteers, professional staff and the local agency resources, the Office of the Ombudsman for the Institutionalized Elderly Volunteer Advocate Program initiative shall strive to improve levels of care received, to enhance the quality of life experienced and through consistent presence and advocacy, prevent abuse, neglect and exploitation of New Jersey's elderly (60 years of age +) residents who reside in long-term care facilities throughout the state.

Major Functions of Volunteer Advocates:

- Maintain presence in long-term care facilities.
- Respond to concerns and complaints to resolve through communication and resolution techniques.
- Educate and inform residents, family members and staff about residents' rights and the Ombudsman services.
- Empower residents to advocate on their own behalf by exercising their rights in specific ways.
- Advocate for the right of residents who cannot advocate for themselves.

Position Description -- Volunteer Advocate:

Purpose: To promote the well-being and quality of life for residents 60 years of age and older, who reside in long-term health care facilities in New Jersey.

Responsible To: Regional Coordinator and the State Coordinator, Volunteer Advocate Program, Office of the Ombudsman for the Institutionalized Elderly.

Duties and Responsibilities:

- Volunteer Advocates will make regular weekly visits to assigned long-term care facility to meet with residents;
- Report any change in "activity" status within the long-term care facility to the Regional Coordinator;
- Educate residents and their family members about the Ombudsman program and residents' rights;
- Empower residents to advocate for themselves by exercising their right in very specific ways;
- Proactively resolve quality of care and quality of life issues within the long-term care facility through the facility liaison or "contact person";
- Collaborate with Ombudsman Field Investigators in resolving issues that are referred for investigation by the Volunteer Advocate;
- Report incidents of abuse, neglect or exploitation directly to the long-term care Administrator and the Ombudsman Office; follow-up with written Report of Concern to the Ombudsman's Office;
- Make collaborative site visits with Ombudsman Field Investigator, as needed, to review complaints or concerns;
- Maintain accurate records of problems/concerns reported; complete and submit monthly activity reports to Regional Coordinator;
- · Attend resident and family council meeting when invited;
- Attend facility's annual survey as invited by the Department of Health's survey team; attend exit conference and report findings to Regional Coordinator;
- Attend quarterly in-service/educational meetings held by Regional Coordinator.

Qualifications:

Applicants must meet the following requirements for participation in the Volunteer Advocate Program:

- ✓ Twenty-one (21) years of age or older and possess a valid New Jersey driver's license or have access to public transportation.
- ✓ Interested in promoting and protecting the rights of elderly long-term care residents.
- ✓ Dependable, possess good verbal skills, including active listening skills.
- ✓ Free from conflict of interest as determined by the Ombudsman Mission Statement.

✓ Is not a habitual user of controlled dangerous substance; has never been convicted of a felony or pleaded guilty to an indictment, information or complaint alleging violation of a federal or state law.

Time Commitment:

- ✓ Attendance at initial thirty-two (32) hour training, pass certification exam with a grade of 70% or higher; attend quarterly regional meetings.
- ✓ Volunteer Advocates are requested to visit assigned long-term care facility a minimum of 4 hours per week.

Supervision:

Volunteer Advocates are directly supervised by the Regional Coordinator in conjunction with the State Program Coordinator who is responsible for providing overall supervision for the Volunteer Advocate Program.

Note:

- Volunteer Advocates are advised not to administer food or liquids, including but not limited to water, alcohol, hot or cold beverages to residents.
- Volunteer Advocates are not permitted to dispense medications, including over the counter drugs, i.e., aspirin, vitamins, etc.
- Volunteer Advocates are not permitted to change a resident's clothes, perform body checks, lift or turn (re-position) a resident, push a wheelchair, or assist with feeding or toileting a resident.

I HAVE READ AND UNDERSTAND THE ABOVE POSITION DESCRIPTION

Volunteer Advocate:		Date:	
	[Signature]		
Regional Coordinator:		Date:	
	[Signature]		

NJ OFFICE OF THE OMBUDSMAN FOR THE INSTITUTIONALIZED ELDERLY VOLUNTEER ADVOCATE PROGRAM APPLICATION

DATE:

NAME:			
ADDRESS:			
		COUNTY:	
EMAIL ADDRESS:			
PHONE# HOME:		WORK: CEL	L:
WHY WOULD YOU LIKE	TO BECOME A V	OLUNTEER ADVOCATE?	
HOW DID YOU LEARN A	BOUT THE VOLU	JNTEER ADVOCACY PROGRAM?	
HAVE YOU EVER VISITED	D A RELATIVE /FI	RIEND IN A NURSING HOME?	
PLEASE DESCRIBE YOUR	EXPERIENCES:		
WHAT DAYS AND TIMES	ARE MOST CON	IVENIENT FOR YOU TO VOLUNTEER?	
DO YOU HAVE TRANSPO	RTATION TO TA	KE YOU TO THE ASSIGNED FACILITY WEEKLY?	Yes No
WILL YOU BE ABLE TO SE	PEND AN AVERA	GE OF FOUR HOURS WEEKLY?	Yes No
ARE YOU WILLING TO K	EEP RECORDS A	ND COMPLETE REPORTS?	Yes No
VOLUNTEER EXPERIENC	Œ		
HAVE YOU EVER BEEN A	VOLUNTEER BE	FORE? IF SO, PLEASE LIST PREVIOUS EXPERIEN	ICES:
(IF MORE SPACE IS NEED	DED, ATTACH SEI	PARATE SHEET.)	
DATE:	FROM:	TO:	
NAME OF ORGANIZATIO	N:		
TYPE OF ORGANIZATION	J:		
DUTIES:			
EMPLOYMENT HISTORY	,		
PLEASE LIST PREVIOUS V	NORK EXPERIEN	CE:	
DATE:	FROM:	TO:	
EMPLOYER:			
TYPE OF BUSINESS:			
JOB DUTIES:			
DATE:	FROM:	TO:	
EMPLOYER:			
TYPE OF BUSINESS:			
JOB DUTIES:			

-			
HAVE YOU EVER WORKED IN A LONG-TERM	I CARE FACILITY B	EFORE?	
WHERE?			
IN WHAT CAPACITY?			
EDUCATION			
HIGH SCHOOL:	COLLEGE:	1 2 3 4	(CIRCLE YEAR COMPLETED)
MAJOR AREA OF STUDY:		DEGREE:	
OTHER STUDIES:			
ANN ADDITIONAL INFORMATION VOLLEGE	NAAV DE LICEELII.		
ANY ADDITIONAL INFORMATION YOU FEEL	MAY BE USEFUL:		
PLEASE LIST THREE REFERENCES WE MAY	CONTACT; TWO	PROFESSIONA	AL AND ONE PERSONAL (NO RELATIVES)
255551125114			
REFERENCE #1			
NAME:			
ADDRESS:			
PHONE#			
RELATIONSHIP: PERSONAL/PROFESSIONAL			
RELATIONSTIII . T ENSONAL/T NOTESSIONAL			
REFERENCE #2			
NAME:			
ADDRESS:			
PHONE#			
RELATIONSHIP: PERSONAL/PROFESSIONAL			
REFERENCE #3			
NAME:			
ADDRESS:			
PHONE#			

PLEASE RETURN THIS APPLICATION TO:
STATE OF NEW JERSEY
OFFICE OF THE OMBUDSMAN FOR THE INSTITUTIONALIZED ELDERLY
VOLUNTEER ADVOCATE PROGRAM
PO BOX 852
TRENTON, NJ 08625-0852

RELATIONSHIP: PERSONAL/PROFESSIONAL

THE OFFICE OF THE OMBUDSMAN FOR THE INSTITUTIONALIZED ELDERLY

Ombudsman Mission Statement

The mission of the Office of the Ombudsman for the Institutionalized Elderly (OOIE) is to secure and protect the rights, and to promote the dignity, of citizens age sixty and older residing in long-term health care facilities. The OOIE seeks to enhance the quality of life and improve the level of care provided to New Jersey's institutionalized elderly.

An individual may not serve as a Volunteer Advocate in the Office of the Ombudsman for the Institutionalized Elderly when the following conditions exist:

- ♣ A person or a member of the person's immediate family has any financial or ownership interest in a long-term care facility where he/she plans to volunteer.
- ♣ A person has been terminated from employment by a long-term care facility within the last five years.
- ♣ A person has a family member who resides in the same long-term care facility in which he/she plans to volunteer.
- ♣ A person cannot volunteer in the long-term care facility in which he/she is employed.

either in New Jersey or in any other jurisdiction? Yes No_	_
Applicants must be interviewed and successfully comp placement as a long-term care facility Volunteer Advocate. attend quarterly in-service meetings.	

Date:

Print Name:

Signature:

Have you ever been convicted of a crime or other offense which has not been expunged by the Court,

THE OFFICE OF THE OMBUDSMAN FOR THE INSTITUTIONALIZED ELDERLY

Consent to Criminal Background Check

Due to the nature of this volunteer advocate position, a criminal background check will assist the State Long-Term Care Ombudsman and his designee in making an informed decision about an applicant's qualifications for the Volunteer Advocate Program.

In assessing the pertinence of a criminal record or a conviction record, the State Long-Term Care Ombudsman or his designee will consider all relevant factors including but not limited to the nature of the crime. The State Long-Term Care Ombudsman may exercise his discretion and provide you an opportunity to review and challenge the information obtained.

After the initial screening to become a Volunteer Advocate, you will receive a consent form asking for the information needed to conduct a criminal background check. The background check will be completed before you are placed in a long-term care facility.

Please note that this Consent to Criminal Background Check is confidential and will be placed in your volunteer application file. The information obtained will remain confidential and will not be disclosed to third parties. Upon requests from law enforcement agencies the State Long-Term Care Ombudsman shall disclose this information. In addition, the State Long-Term Care Ombudsman shall disclose this information to third parties when federal and state laws mandate.

I have read and understand this consent form. I authorize the State Long-Term Care Ombudsman or his designee to conduct a criminal background check. I agree to provide the Office of the Ombudsman for the Institutionalized Elderly with the information necessary to complete a criminal background check. I understand if I falsify, withhold, or misrepresent any information or facts deemed necessary to complete a criminal background check the remedy may be immediate termination from the Volunteer Advocate Program.

Print Name		
 Signature		
 Date		